

CLAIMS ONLY							Application Number 10802892		Filing Date	
							Applicant(s)			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	I		I							
2		I		I						
3										
4										
5										
6										
7		I								
8										
9										
10		I		I						
11				I						
12					I					
13						I				
14	I			I						
15		I			I					
16		I			I					
17		I			I					
18		I			I					
19		I			I					
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
32										
33										
34										
35										
36										
37										
38										
39										
40										
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
Total Indep	2		2							
Total Depend	17	←	17	←	←	←				
Total Claims	19		19							